

## Proposed Primary Service Model for South Dakota

If the Team considers two or more services for a child, the case is open to using the following primary service model:

Primary Providers identified

Outcomes written

Strategies include consultation with other disciplines

Frequency and intensity of primary service determined

Frequency and intensity of consultation determined

Primary offered 1 x per week or month or whatever is considered necessary.

Consultation offered 1 x per month or 1x every other month or 1 x per quarter, depending on need and frequency of primary service. The more primary services are needed, the more frequent the consults will be.

Consultant never sees the child independent of the primary provider.

Consultation is interpreted as attending therapy session together with the primary provider. Each provider attending the session may bill for concurrent service at full rate.

Consultant is to attend review meetings as appropriate, but at a minimum at the 6 month review and the annual review. In lieu of attending the meetings, the consultant may submit a written report to the team via the primary provider. However, there will be no reimbursement for a written report. The consultant must be present at the meeting to bill for their time.

Consultation is limited to the primary provider and one specialist in any concurrent visit. If two specialists are consulting, each one works with the primary provider independently.

Both the primary provider and consultant are expected to view the parent as the child's first teacher and work with the parents to teach them what to do with the child during typical daily routines in order to accomplish the identified outcomes. It puts the provider in the role as coach to the parent, rather than providing direct therapy to the child. It is expected that the provider will work with the child during therapy sessions to demonstrate to the parent the technique under the supervision of the provider. Each subsequent session is a check to see how the parent is doing and provide suggestions and additional techniques as appropriate.